								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO											/		
Effective October 1, 2003								8836-198/1R1222/-					
CLAIMS AS FILED - PART I									NTITY		OTHER		
Γ			(Column 1) (C			mn 2)	TYPE	TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS			20				RA	TE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* \$		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			₩ minus 3 =				X43=			OR	X86=	21	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				+14	5=		OR	+290=	0.0	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	AL		OR	TOTAL	856	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							\LL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	i	
	Independent	* ~	Minus	***			X43	3=		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	5-		OR	+290=		
									<u> </u>	ام	TOTAL		
			ADDIT. FEE OR ADDIT. FEE										
_		(Column 1) (Column 2) (Column 3)							ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA	RAT	Έ	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=	1 Bare Series	
	Independent	*	Minus	***		=	X43	<b>3</b> =		OR	X86=		
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On			
								5=		OR	+290=		
								TAL FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 3)											
Z	`	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	<u> </u>	= .	X\$ 9	)=		OR	X\$18=		
	Independent	*	Minus	***	•	=	X43	= -		OR	X86=	-	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								- 1	UR			
	f the entricin color	ma 1 is loss than th	o ontor in onl	mn 2 umita	"O" in act	uma 3	+145		1	OR	+290=	,	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE										OR ,	TOTAL ADDIT. FEE		
		mber Previously Pai hber Previously Pai					ound in th	e app	propriate box	in col	umn 1.		